RIVERPORT ELECTRIC LIGHT COMMISSION

APPLICATION FOR WIRING PERMIT & INSPECTION

PROPERTY OWNER:

PROPERTY CIVIC ADDRESS:

CONTRACTOR NAME:

CONTRACTOR ADDRESS:

CONTRACTOR TELEPHONE NUMBER:

CONTRACTOR E-MAIL ADDRESS:

CERTIFICATE NUMBER:

CONTRACTOR E-MAIL ADDRESS:

SERVICE DETAILS:

AMPS

VOLTS

PHASE

CLASSIFICATION: Residential __ Commercial __ Industrial ___ Temporary ___

TYPE: New ___ Addition ___ Service Change ___ Repairs ___

TOTAL ELECTRICAL INSTALLATION COSTS $:

PERMIT FEE (INCLUDES HST):

I, THE UNDERSIGNED, CERTIFY THAT I AM THE HOLDER OF A VALID CERTIFICATE OF QUALIFICATION IN THE ELECTRICAL CONSTRUCTION TRADE, ISSUED UNDER THE AUTHORITY OF THE NOVA SCOTIA APPRENTICESHIP AND TRADES QUALIFICATIONS ACT. I FURTHER CERTIFY THAT THE ELECTRICAL INSTALLATION WILL BE IN CONFORMANCE WITH THE APPLICABLE PROVINCIAL ACTS AND THEIR REGULATIONS, UTILITY STANDARDS, AND RELATED CODES. UPON COMPLETION, I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO ENSURE THAT THE INSTALLATION IS WORKING IN A SAFE AND PROPER MANNER.

SIGNATURE:

PERMIT NUMBER: